EXHIBIT A

HEALTH[™] Referral Form

Referral								
Reference #: 00674974 Status: COMPLETE			Created By: stipton Asign		Asigned	d То		
Patient								
Patient:			Inmate #:		DOB:	S	Sex: M	
Facility								
Client: MICI	HIGAN DOC		Facility: MUSKEGON C	ORRECTION	IAL FACILITY	c	Cost Center: 93029	
Other Cover				1				
Corizon Responsible: Y Other Coverage: N			Other Cov	erage Type:	Effectiv	ve Date:		
Comments								
Medical Cat				T				
Medical Cla	ssification:	npatient		Subcatego	ory: Acute			
5 ()								
Reason for I		-14	!_					
W 11/29/201	7 Surgery- co	olostomy repa	ur					
Diagrapia								
Diagnosis K94.09	Other compl	ications of ac	lootomy			T	NECHARCE	
K94.09	Melena	ications of co	iostorny				DISCHARGE SECONDARY	
K94.09	1	ications of co	loetomy				PRINCIPAL	
1134.03	Tottler compi	ications of co	lostorry			,·	KINOII AL	
Authorizaito	n Details							
		R. BARBARA		Referred T				
Referred From: HOOVER, BARBARA Admit Date: 12/6/2017 10:15 AM					Discharge Date: 12/10/2017 7:35 PM			
Discharge Disposition				Transfer				
	•			•				
Authorization	n Services							
Service Cate	egory				Seen Date	Approval	Units	
ACCOMMO	DATION REV	ENUE CODE	S; LOC; MED/SURG/GYN	١	12/6/2017	Υ	1	
ACCOMMO	DATION REV	ENUE CODE	S; LOC; MED/SURG/GYN	١	12/7/2017	Υ	1	
ACCOMMO	DATION REV	ENUE CODE	S; LOC; MED/SURG/GYN	1	12/8/2017	Υ	1	
ACCOMMO	DATION REV	ENUE CODE	S; LOC; MED/SURG/GYN	١	12/9/2017	Υ	1	
	ts & Verification	on		1				
Scheduled Date Time Seen Date		Cancel/Res	Cancel/Reschedule Reason					
Clinical Note								
JGhiardi - E Pt was d/c o	ec 11, 2017 2 n 12/10/17	2:50 PM						
JGhiardi - Dec 7, 2017 12:56 PM Pt admitted on 12/6/17								
LMinor - Dec 1, 2017 8:32 AM Approval to site, inpatient								
KPapendick - Dec 1, 2017 7:55 AM Approved: Colostomy repair/revision								
LMinor - Dec 1, 2017 7:50 AM Photo uploaded								

LMinor - Nov 30, 2017 1:45 PM

Photo requested from site

KPapendick - Nov 30, 2017 1:41 PM

NMI: photo.

LMinor - Nov 30, 2017 1:32 PM

Response from site: I put in for repair because I'm sure the reversal would be denied.

LMinor - Nov 30, 2017 12:55 PM

More information requested from site

KPapendick - Nov 30, 2017 12:14 PM

NMI: reversal or repair.

LMinor - Nov 30, 2017 11:57 AM

Procedure/Test Requested: colostomy repair

Specialty Service Requested: Surgery

Provider: approved

Presumed Diagnosis: Blood in stool 578.1

Signs & Symptoms: Date of Onset:

31 year old with a hx of colostomy s/p GSW in 2012. Pt recently seen in ED for blood in colostomy bag. Pt noticed blood after having a BM. CT of abdomen shows multiple residual bullet fragments and a right colostomy with peristomal hernia. FOBT positive. Pt seen by general surgeon who completed a colonoscopy showing inflammatory polyps and a loop colostomy with moderate/severe prolapse. Pt seen by surgeon who requests to proceed with colostomy repair.

Request for Colostomy repair

t list

to UMMD

LMinor - Nov 30, 2017 10:31 AM

Surgery consult notes requested from site

stipton - Nov 29, 2017 1:44 PM

W 11/29/2017 Surgery- colostomy repair

SOAP

JGhiardi - Dec 11, 2017 2:51 PM 12/11/17; PER EPIC PORTAL:

Patient discharged on 12/10/17 to 3E, DWH.

From last progress note: PICO changed, okay to take off in 3 days. Will need to follow up in 2 weeks for staple removal.

Colostomy prolapse

Pt is 32 year old male who had multiple abdominal surgeries 2/2 GSW to abdomen in 2012 with subsequent colostomy. He has subsequently developed a prolapse which is causing him some discomfort and occasional bleeding. 3 Day Post-Op s/p Colostomy reversal-Diet: tolerating regular diet-Pain: Continue with PO Tylenol, oxy IR-UOP: Adequate UOP-Bowel Fx: +BM, + flatus-ABX:
None indicated at this time-Imaging: No new imaging-Lines: PIV- Labs: AM labs-Encourage ambulation/IS.-DVT/GI ppx: Continue
DVT prophylaxis Lovenox 40 qd (SCDs), GI prophylaxis with diet advancement-Consults: None-Disposition: Overall doing well. Pain
controlled with PO we in 2 weet of several diet. + BMs. Plain to DC to prison today. PICO changed, okay to take off in 3 days. Will need to follow up in 2 weeks for staple removal. Leukocytosis is resolved.

Pt presented in clinic 12/6/2017. He has hx of GSW that resulted in ex lap with colostomy in 2012, presents with bleeding out ostomy

2/2 prolapse. Patient admitted for elective colostomy revision on 12/7. Operation without complications, patient tolerated procedure well. Pain was well controlled with tap block, patient's pain meds were changed to PO and was well tolerated. Patient's diet was increased over the next few days without any nausea or vomiting. Patient had multiple bowel movements that were initially bloody, but has resolved. Patient is stable and ready for discharge to prison./jmg,rn.

s/a

s/a s/a

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JGhiardi - Dec 8, 2017 11:20 AM

12/8/17; PER EPIC PORTAL

BP-138/85, T-98.3, P-79, R-18, pulse ox-99% r/a.

Labs: Na-135, K-4.1, BUN-12, Cr-0.68, WBC-15.5, Hgb-16.9, Hct-45.4, plt-284.

IS: oximetry, activity progression, full liquid diet, SCD's, oxycodone, MS prn, LR@50ml/hr, Colace, Lovenox, NS bolus, Mg sulfate

IV, Entereg, Ofirmev, Dulcolax.
Pt is 32 year old male who had multiple abdominal surgeries 2/2 GSW to abdomen in 2012 with subsequent colostomy. He has subsequently developed a prolapse which is causing him some discomfort and occasional bleeding. 1 day postop colostomy reversal. -Diet: CLD --> FLD today / decrease IVF 50 cc/ml Pain: Continue with PO Tylenol/morphine and OXY IR

UOP/Bowel Fx: Adequate UOP - will discontinue Foley catheter today, await return of bowel function, continue/start bowel regimen

ABX: None indicated at this time

Imaging: No new imaging Lines: PIV, Foley - to be discontinued today

Labs: AM labs

Encourage ambulation/IS.

DVT/GI ppx: Continue DVT prophylaxis Lovenox 40 Qdaily (SCDs), GI prophylaxis with diet advancement

Consults: None

Disposition: Overall doing well. Will advance diet and add bowel regimen. Continue to manage postoperative pain. Otherwise doing

Leukocytosis-Likely reactive - will continue to monitor-No indication for antibiotics at this time

Hypomagnesemia-Monitor and replace PRN./jmg,rn.

s/a s/a

s/a

JGhiardi - Dec 7, 2017 3:40 PM 12/7/17; Per EPIC PORTAL:

BP-129/72, T-98.4, P-54, R-16, pulse ox-100% Labs; WBC-5.4, K-4.1, BUN-10, Cr-0.94, Mg-1.9

Preop H&P for surgery- Pt with history of GŠW and subsequent exploratory laparotomy with colostomy in 2012 who presented initially with CC of bleeding per ostomy. He also reports that it has been bothering him as it interferes with his clothing and is uncomfortable. Otherwise, it is functioning well. He presented to outside ED in July of this year with complaints of bleeding. He subsequently had a colonoscopy in September at an outside facility which demonstrated loop colostomy with moderate-severe prolapse (12-15 cm), 5 mm pedunculated transverse colon polyp, peristomal tags with some slight bleeding. He presents for elective colostomy revision.

Meds; Bisacodyl, Flagyl, neomycin, Glycolax, Entereg, Mefoxin, Colostomy prolapse-Pt is 32 year old male who had multiple abdominal surgeries 2/2 GSW to abdomen in 2012 with subsequent colostomy. He has subsequently developed a prolapse which is causing him some discomfort and occasional bleeding. He presents

pre-operatively for bowel prep and colostomy revision 12/7 with Dr. Obi
Mechanical bowel prep as ordered-CLD until 2 hours prior to surgery, then NPO-continue with IVF-SCDs-Surgery tomorrow afternoon with Dr. Obi-Obtain consent-Entereg 1 hr pre op./jmg,rn

s/a

s/a s/a

Interqual Notes

JGhiardi - Dec 7, 2017 3:41 PM

Elective

LMinor - Nov 30, 2017 10:31 AM

No IQ review found for this request

Memos

JGhiardi - Dec 7, 2017 3:41 PM

Accounting Memo

STipton - Nov 29, 2017 1:44 PM

407

Documents					
File	Description	Uploaded By			
Surgery notes.pdf	Surgery notes	LMinor on Nov 30, 2017 11:58 AM			
.JPG	photo	LMinor on Dec 1, 2017 7:51 AM			
.pdf	um info	JGhiardi on Dec 7, 2017 3:43 PM			
admit.pdf	um info	JGhiardi on Dec 7, 2017 3:43 PM			

Referral Form

.pdf	um info	JGhiardi on Dec 8, 2017 11:20 AM
d-c review.pdf	um info	JGhiardi on Dec 11, 2017 2:51 PM
12-10-17 admit review.pdf	um info	JGhiardi on Dec 11, 2017 2:51 PM
12-10-17 review.pdf	um info	JGhiardi on Dec 11, 2017 2:51 PM

Attributes			
Transport Type	1		
Secure Unit	4		
Scheduled Admission: Surgical	YES		
MI IP Category: Gastroenterology	YES		